PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10809002

CLAIMS AS FILED - PART I							9	SMALL	ENTITY		OTHE	R THAN
TOTAL CLAIMS			(Colun	nn 1)	(Column 2)			TYPE		OR		LENTITY
TOTAL CLAIMS			X	50				RATE	FEE		RATE	FEE
FOR			NUMBE	NUMBER FILED		NUMBER EXTRA		BASIC FE	E 385.0	0 OR	BASIC FE	E 770.00.
TOTAL CHARGEABLE CLAIMS			On	Ominus 20=		• 30		X\$ 9=	·	OR	X\$18=	0/4
INDEPENDENT CLAIMS			3 minus 3 =		· 6			X43=	+		Voc	1340
М	ULTIPLE DEPE	NDENT CLAIM	PRESENT				ŀ		+			
*1	f the differenc	e in column 1 is	s less than a	n zero, enter "0" in column 2			L	+145=		OR	+290=	1/2
CLAIMS AS AMENDED - PART II								TOTAL	L	OR	TOTAL	13/0
•		(Column 1)	HINENDE	(Column 2) (Column 3)				SMALL	ENTITY	OR		R THAN ENTITY
		CLAIMS		HIGHE						¬ ```	UIIIAEE	,
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	- ·	RATE	ADDI- TIONAL FEE
	Total		Minus	**		=		X\$ 9=		OR	X\$18≃	
AME	Independent	*	Minus	***		=	上	X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						- -		 	┨╙┸┠		
								+145=		OR	+290=	
·							AD	TOTAL DIT. FEE		OR	TOTAL ADDIT, FEE	
_		(Column 1)		(Colum		(Column 3)						
Ξ.		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID FO	ER JSĽY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	
A A	Independent	* NTATION OF ML	Minus	***		=		X43=	•	OR	X86=	
	MOTTRESE	TATION OF MIC	DETIPLE DEF	PENDENT	LAIM	<u> </u>	1	145=	· · · · · ·	OR	+290=	
								TOTAL DIT. FEE		OR A	TOTAL DDIT. FEE	
(Column 1) (Column 2) (Column 3)										7.	571.1 42	
ر		CLAIMS REMAINING		HIGHES NUMBE	T	PRESENT	Г		ADDI-	ſ	<u>-</u>	ADDI-
יייבואסואובואו		AFTER AMENDMENT		PREVIOU: PAID FO		EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
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	ndependent	*	Minus	***		=	X	43=			X86=	
	INO I PHESE	VITATION OF MU	LTIPLE DEP	ENDENT C	LAIM		-			OR _		
· If i	If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
Th	e "Highest Numb	per Previously Paid	For (Total or	independent)	is the h	o, enter 3. ighest number f	ound ii	n the appr	opriate box			7